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STATE OF DELAWARE
BOARD OF VETERINARY MEDICINE

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**APPLICATION FOR VETERINARIAN LICENSURE/EXAMINATION
INSTRUCTION SHEET**

General Information

- If you hold a *current, active* Veterinarian license in another jurisdiction (state, the District of Columbia or U.S. territory), follow the instructions for applying by reciprocity.
- If you do **not** hold a *current, active* Veterinarian license in another jurisdiction – regardless of whether you need to take the examination – follow the instructions for applying by examination.

Veterinary Licensing Examinations

You must pass the North American Veterinary Licensing Examination (NAVLE), the current licensing examination, unless you passed its predecessors, the National Board Examination and Clinical Competency Test (NBE/CCT). However...

- If you were first licensed before 1971, NBE scores are not required.
- If you were first licensed before 1980, CCT scores not required.

Since the Delaware Board of Veterinary Medicine must approve you to take the NAVLE, you must submit **two applications** – a licensure application to the Delaware Board and a NAVLE application to the National Board of Veterinary Medical Examiners (NBVME). **See [NAVLE](#) for important information about the deadlines for submitting your applications.**

Requirements for All Applicants

- ☐ Submit a signed, completed and notarized [Application for Veterinarian Licensure/Examination](#).
- ☐ Enclose the required non-refundable fee by check or money order made payable to "State of Delaware" as follows:
 - ☐ If you are filing an application for examination or permanent licensure, submit the [processing fee](#).
 - ☐ If you are applying for a Temporary License, submit the [temporary license fee](#) **in addition to** the processing fee for the application.
 - ☐ If you are applying for a Temporary Permit, submit only the [temporary permit fee](#). The processing fee is not required.

Note: See the **Temporary Permits and Licenses** section below for the difference between a Temporary Permit and a Temporary License.

- ☐ If you have already passed the NBE/CCT or NAVLE, whichever applies, arrange for the Board office to receive a *Score Report and Credential Information*, sent directly from the Veterinary Information Verification Agency (VIVA) to the Board office. To request a *Score Report and Credential Information*, see [VIVA](#).
 - If you passed the NBE/CCT or NAVLE, whichever applies, over two years before applying, submit proof of completing 36 hours of continuing education within the previous three years.
- ☐ If you have ever held a Veterinarian license in another jurisdiction (state, U.S. territory or District of Columbia), arrange for the Board office to receive a verification of licensure from each jurisdiction where you have ever held a license, sent *directly* from the jurisdiction to the Board office.

- ☐ If you received your veterinary education at a foreign veterinary college that is *not* AVMA-accredited, submit a copy of the certificate issued by the Educational Commission for Foreign Veterinary Graduates (ECFVG) or by the Canadian Veterinary Medical Association (CVMA), as applicable.
- Delaware *requires* the ECFVG or CVMA certificate *before* permitting you to take the NAVLE.
 - For veterinary colleges that are AVMA-accredited, see [AVMA Educational Resources](#).

- ☐ If you have never been issued a U.S. Social Security Number (SSN), submit a [Request for Exemption from Social Security Number Requirement](#).

The Privacy Act of 1974, Section 7, requires the following information to be given to all applicants: Applicants for any Delaware professional or occupational license, permit, registration or certificate (other than Gaming permits) are required to provide a U.S. SSN (29 Del. C. §8735(m)). The Division of Professional Regulation uses the SSN primarily to verify identity and safeguard personal information. It may also be used to enforce child support obligation (13 Del. C. §2216) and for other lawful purposes.

Additional Requirements for Applicants by Examination

If you are applying by examination – regardless of whether you need to take the NAVLE or have already passed it – you must provide proof of your education *in addition to* the items listed in **Requirements for All Applicants** section above.

- ☐ Arrange for the Board office to receive proof of your education as shown in the table below:

IF you...	THEN arrange for the Board office to receive a(n)...	IMPORTANT
graduated from an AVMA-accredited veterinary college	official transcript sent directly from the veterinary college to the Delaware Board office	The transcript must show the date you received your veterinary degree.
graduated from a foreign veterinary college that is not AVMA-accredited	copy of the <i>completion certificate</i> issued by the ECFVG or CVMA	Delaware <i>requires</i> the ECFVG or CVMA certificate <i>before</i> permitting you to take the NAVLE.
are enrolled in your final year at an AVMA-accredited veterinary school	notarized letter from a school official, sent directly from the school to the Delaware Board office	The letter <i>must</i> state: <ul style="list-style-type: none"> • that you are enrolled in your final year and • the expectation that you will graduate from that school .

- ☐ If you are approved to take the NAVLE based on a letter from your school, arrange for the Board office to receive an official transcript, sent *directly* from the veterinary college to the Delaware Board office, when you graduate.
- The transcript must show the date you received your veterinary degree.
 - The Board will consider the application for licensure only after it receives the official transcript.

Temporary Permits and Licenses

- A **temporary permit** applies to **nonresident** veterinarians who are validly licensed in another jurisdiction and requesting to work temporarily in Delaware. The requirements are listed in the **Requirement for All Applicants** section above.
- A **temporary license** applies when the temporary permit does not. *In addition to* meeting all of the requirements listed above, arrange for the Board office to receive a letter from a Delaware-licensed veterinarian certifying that you will remain in the veterinarian's continuous employ and under his or her supervision and that he or she will monitor your professional activities and be fully responsible for you while you are under temporary licensure.

Under no circumstances should you begin practicing in Delaware before the temporary license or permit is issued.



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APPLICATION FOR VETERINARIAN LICENSURE/EXAMINATION

TYPE OF APPLICATION

1. Check type of application you are filing (check one):

- ☐ **Licensure by Examination** – I do **not** hold a current, active license in another jurisdiction.
- ☐ **Licensure by Reciprocity** – I hold a current, active license in another jurisdiction.
- ☐ **Temporary Permit** – I am **not** a Delaware resident **and** I hold a current, active license in another jurisdiction. If you check this type, skip to the **IDENTIFYING AND CONTACT INFORMATION** section.

2. Are you also applying for a Temporary License to practice *under supervision*? Yes ☐ No ☐ If yes, enter the following information about the veterinarian who will supervise you while you practice under a temporary license:

Name of Supervising Veterinarian: _____ Delaware License No.: N1 - _____

Practice Location: _____

Arrange for the Board office to receive a letter from the veterinarian. See Instruction Sheet.

IDENTIFYING AND CONTACT INFORMATION – All applicants complete this section.

3. Full Name: _____
Last/Family First Middle

4. Other Names Used: ☐ None _____
(Include maiden, prior married, alternate spellings)

5. Date of Birth (month/day/year): _____ Gender: ☐ Male ☐ Female

6. Have you been issued a U.S. Social Security Number? Yes ☐ No ☐ If yes, enter your SSN: _____
If no, you must file a [Request for Exemption from Social Security Number Requirement](#).

7. Mailing Address: _____
City State Zip

8. Phone: _____ Email: _____ ☐ None
daytime evening or cell

VETERINARY EDUCATION – All applicants complete this section.

9. Did you attend (or are you attending) an American Veterinary Medical Association (AVMA) accredited veterinary college? Yes ☐ No ☐ If yes, enter this information about the veterinary college:

Name: _____

Address: _____

Have you graduated? Yes ☐ No ☐ If yes, enter this information about your degree, then skip to Question 11:

Degree Date: _____ Veterinary Degree: _____

If you are applying by examination, arrange for the Board office to receive an official transcript sent *directly* from the veterinary college to the Board office.

10. Did you attend a foreign veterinary college that is **not** AVMA-accredited? Yes ☐ No ☐ If yes, enter this information about your college, then skip to the **EXAMINATIONS** section:

Name: _____

Address: _____

Degree Date: _____ Veterinary Degree: _____

Enclose certificate issued by the Educational Commission for Foreign Veterinary Graduates (ECFVG) program or Certificate of Qualification issued by the Canadian Veterinary Medical Association (CVMA).

11. Are you a final-year veterinary student? Yes ☐ No ☐ If yes, enter this information about your degree.

Expected Degree Date: _____ Expected Veterinary Degree: _____

Arrange for the Board office to receive a notarized letter sent directly from the veterinary college verifying that you are a final-year student and your expected graduation date. When you graduate, arrange for the Board office to receive your official transcript.

EXAMINATIONS – All applicants complete this section.

12. Have you already passed any veterinary licensing examinations (NAVLE, NBE, CCT)? Yes ☐ No ☐ If yes, complete the following table showing which exam(s) you have passed, then skip to the **LICENSURE/PRACTICE HISTORY** section.

EXAMINATION	WHERE TAKEN	DATE PASSED
National Board Examination (NBE)		
Clinical Competency Test (CCT)		
North American Veterinary Licensing Examination (NAVLE)		

- **Arrange for the Veterinary Information Verification Agency to send a *Score Report and Credential Information* directly to the Board. This applies whether you are applying by examination or by reciprocity.**
- **If the date you passed the exam is over two years ago, submit proof of 36 hours of continuing education completed within the three years before applying.**

13. Are you are applying by reciprocity? Yes ☐ No ☐ If yes, enter the following information about your **first** license, then skip to the **LICENSURE/PRACTICE HISTORY** section:

Jurisdiction: _____ Year Licensed: _____

14. If applying to take the NAVLE in Delaware, are you requesting any accommodations on the basis of disability as defined under Title II of the Americans with Disabilities Act? Yes ☐ No ☐ If yes, request further information from the Board office.

LICENSURE/PRACTICE HISTORY – All applicants complete this section.

15. Have you *ever* held a license to practice veterinary medicine in another jurisdiction? Yes ☐ No ☐ If yes, list each jurisdiction where you have held a license:

JURISDICTION	LICENSE NUMBER	IS THIS LICENSE <i>CURRENT</i> ?
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>

Arrange for the Board office to receive a license verification sent to the Board directly from *each* jurisdiction where you have ever held a Veterinarian license.

DISCLOSURES – All applicants complete this section.

16. Have you ever been convicted of or entered a plea of guilty or *nolo contendere* (no contest) to any felony, misdemeanor or any other criminal offense, including any offense for which you have received a pardon, in any jurisdiction? Yes ☐ No ☐ **If yes, submit a complete explanation and a certified copy of your criminal history record from any jurisdiction in which you have been convicted or pardoned. For information on obtaining a Delaware criminal history record, see [State Bureau of Identification](#).**
17. Are any criminal charges pending against you? Yes ☐ No ☐ **If yes, arrange for the appropriate authorities to provide information about the charge directly to the Board. The information should be specific enough to enable the Board to determine whether the charge is substantially related to the practice of veterinary medicine.**
18. Have you received any administrative penalties, including but not limited to fines, formal reprimands, license suspension or revocation, and probationary limitations? Yes ☐ No ☐ **If yes, arrange for the jurisdictions to send information about the disciplinary action directly to the Board office.**
19. Have you entered into a consent agreement that places conditions on your professional conduct or practice, including any voluntary surrender of license? Yes ☐ No ☐ **If yes, arrange for the jurisdictions to send information about the disciplinary action directly to the Board office.**
20. Are any disciplinary proceedings or unresolved complaints concerning your practice of veterinary medicine pending against you at present? Yes ☐ No ☐ **If yes, arrange for the jurisdictions to send information about the disciplinary action directly to the Board office.**
21. Have your Drug Enforcement Administration (DEA) privileges ever been restricted or revoked? Yes ☐ No ☐ **If yes, submit a letter explaining fully. Include copies of all appropriate records.**
22. Do you have any impairment related to drugs or alcohol that would limit your ability to undertake the practice of veterinary medicine in a manner consistent with the safety of a patient or the public? Yes ☐ No ☐ **If yes, submit a letter explaining fully. Include copies of all appropriate records.**

If your application requires Board review, the Board office must receive all of these items no later than 4:30 PM ten full working days before the Board's meeting date:

- Completed, signed and notarized application form
- Fee payment
- All required supporting documentation.

Applications that are not complete within 12 months of filing may be considered abandoned and discarded. When your application is complete, please allow 4-6 weeks to receive your license.

AFFIDAVIT

I certify that the information in this application is complete and true. I understand that the intentional inclusion of false or fraudulent information in this application, or the material omission of information which might have a bearing on licensure, may result in the denial of licensure and will be reported to the Attorney General for further action.

Signature of Applicant: _____ **Date:** _____

City of _____ County of _____

Sworn to before me and subscribed in my presence this _____ day of _____, 2_____

Notary Signature: _____

SEAL

My commission expires: _____

APPLICATIONS THAT ARE UNSIGNED, NOT NOTARIZED, INCOMPLETE OR NOT ACCOMPANIED BY THE REQUIRED FEE WILL BE REJECTED.